

Indiana Discharge Monitoring Report Form 30530

FACILI	MONTH	MONTHLY MONITORING REPORT (MMR) FOR NPDES INDUSTRIAL PERMITS Revision Pending Approval - Jan. 2003								
1010	FACILITY NAME AND ADDRES	THIS R	PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH. THIS REPORT MUST BE POSTMARKED NO LATER THAN THE 28TH OF THE FOLLOWING MONTH.							
		Mail To: Indiana Dept. of Environmental Management Office of Water Quality / Data Management Section P.O. Box 6015 Indianapolis, Indiana 46206-6015								
I N										
	PERMIT NUMBER			OUTF	ALL NO.	N	MO.	r.		
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FREQUENCY	Permit Condition Monitored									
EFFLUENT	Permit Minimum									
LIMITATIONS	Permit Average									
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persons who manage the	system, or those persons dir	ectly								
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	e possibility of fine and impr	_		(SIGNATU		IPAL EXECUT			DATE	
knowing violations.					OR AUTHO	RIZED AGENT))	Page 1 o	f	



Indiana Discharge Monitoring Report Form 30530 MONTHLY MONITORING REPORT (MMR) FOR NPDES INDUSTRIAL PERMITS Revision Pending Approval - Jan. 2003 Y NAME AND ADDRESS: PLEASE COMPLETE AND SUBMIT ONE COPY STATES.

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					Mail To	Office of P.O. Box		ata Management Sec	ction		
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persons who manage	mation submitted. Based the system, or those per	sons directly		(SIGN	ATURE OF C	ERTIFIED OPER	RATOR)		DATE		
	ing the information, the i vledge and belief, true, a				PHONE	NUMBER		CERTIFIC	ATION NO.		
I am aware that there a	are significant penalties t the possibility of fine an	for submitting fa	ilse		FITORE	LIUMBLA		CLITTIC	AHON NO.		
knowing violations.				(SIGNATU	RE OF PRINC OR AUTHO	DATE Page of					



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I certify under penalty were prepared under a system designed to and evaluate the infor persons who manage	y of law that this docume my direction or supervisi assure that qualified per rmation submitted. Base e the system, or those per	on in accordance sonnel properly go d on my inquiry of sons directly	with ather the	(SIGNA	TURE OF CE	RTIFIED OPE	RATOR)		DATE	
-	ering the information, the				DUONE	MUMBER		CERTIE	CATION NO	
to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for			se	PHONE NUMBER				CERTIFI	CATION NO.	
knowing violations.				(SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT)					DATE Page of	